Case 6:17-bk-19433-MH Doc 1 Filed 11/13/17 Entered 11/13/17 17:27:07 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Edward First name Uy Middle name Hidalgo Last name and Suffix (Sr., Jr., II, III)	Trixie First name Middle name Quijada Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		Trixie Quijada-Hidalgo Melanie Quijada
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9914	xxx-xx-5408

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Debtor 1 Edward Uy Hidalgo Debtor 2 Trixie Quijada

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINS	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		31205 Sutherland Drive Redlands, CA 92373 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		San Bernardino County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	tor 1 tor 2	Edward Uy Hidalg Trixie Quijada	0				Case	number (if known)	
Pari	t 2 :	Tell the Court About \	our B	ankruptcy Ca	se				
7.	Banl	chapter of the cruptcy Code you are			orief description of each, s go to the top of page 1 ar			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choc	sing to file under	□ с	hapter 7					
				hapter 11					
			□ с	hapter 12					
			■ C	hapter 13					
8.	How	you will pay the fee	•	about how yo order. If your a pre-printed I need to pay	u may pay. Typically, if you attorney is submitting you address. If the fee in installments.	ou are paying ir payment on If you choose	the fee yourself, your behalf, you	you may pay with cash ir attorney may pay with	r local court for more details a, cashier's check, or money a credit card or check with
				I request that but is not requapplies to you	uired to, waive your fee, a	may request and may do so unable to pay	only if your inco the fee in instal	me is less than 150% of lments). If you choose	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out your petition.
9.		you filed for	□No).					
		ruptcy within the 8 years?	■ Ye	es.					
				District	Riverside	When	3/29/17	Case number	6:17-bk-12522
				District	Riverside	When	4/27/15	Case number	6:15-bk-14188
				District	See Attachment	When		Case number	
10.	case	any bankruptcy s pending or being	■ No						
	not f you,	by a spouse who is iling this case with or by a business ner, or by an ate?	□ Ye	9 S.					
				Debtor				Relationship to y	ou
				District		When		Case number, if	known
				Debtor				Relationship to y	
				District		When		Case number, if	known
11.		ou rent your lence?	■ No	Go to li	ine 12.				
	. 5510		☐ Ye	es. Has yo	ur landlord obtained an ev	viction judgme	ent against you a	ind do you want to stay	in your residence?
					No. Go to line 12.				
					Yes. Fill out <i>Initial Staten</i> bankruptcy petition.	nent About an	Eviction Judgm	ent Against You (Form	101A) and file it with this

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	otor 2 Trixie Quijada			Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propri	etor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of be	usiness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	y	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:		
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Brol	xer (as defined in 11 U.S.C. § 101(6))	
			■ None of the abo	ve	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Cha	apter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention	
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?		
				Number, Street, City, State & Zip Code	

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Debtor 1 Edward Uy Hidalgo
Debtor 2 Trixie Quijada Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 6:17-bk-19433-MH Doc 1 Filed 11/13/17 Entered 11/13/17 17:27:07 Desc Main Document Page 6 of 55

	tor 1 Edward Uy Hidalg tor 2 Trixie Quijada	0			Case numbe	(if known)	
art	6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consum individual primarily for a personal, for the No. Go to line 16b. Yes. Go to line 17.			ned in 11 U.S.C. § 101(8) as "incurred by an	
		16b.	Are your debts primarily busines money for a business or investmen				
			☐ No. Go to line 16c.	it of tillough the	operation of the bus	iness of investment.	
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consur	mer debts or busines	s debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No □ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0)	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 \$10,000,001 \$50,000,001 \$100,000,00	- \$50 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 \$10,000,001 \$50,000,001 \$100,000,00	- \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Part	7: Sign Below						
or	you	I have ex	camined this petition, and I declare u	nder penalty of p	perjury that the inform	nation provided is true and correct.	
			chosen to file under Chapter 7, I am tates Code. I understand the relief a			under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.	
			rney represents me and I did not pay tt, I have obtained and read the notic			t an attorney to help me fill out this	
		I request	relief in accordance with the chapte	r of title 11, Unite	ed States Code, spe	cified in this petition.	
		bankrupto and 3571	cy case can result in fines up to \$25		onment for up to 20 y	or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Edward	ard Uy Hidalgo I Uy Hidalgo e of Debtor 1		Is/ Trixie Quijada Trixie Quijada Signature of Debto		
		Executed	MM / DD / YYYY			vember 13, 2017 / DD / YYYY	

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Debtor 1 Debtor 2	Edward Uy Hidalge Trixie Quijada	0	Cas	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this peti under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that	States Code, and have e	explained the relief av	ailable under each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.	ertify that I have no know	rledge after an inquiry	that the information in the
		/s/ KEITH F ROUSE	Date	November 13, 2	:017
		Signature of Attorney for Debtor		MM / DD / YYYY	
		KEITH F ROUSE 170559 Printed name			
		LAW OFFICE OF KEITH F ROUSE			
		Firm name			
		600 South Lake Avenue, Suite 507 Pasadena, CA 91106			
		Number, Street, City, State & ZIP Code			

Email address

rouselaw@hotmail.com

Contact phone (626) 449-4211

170559Bar number & State

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Debtor 1 Edward Uy Hidalgo

Debtor 2 Trixie Quijada Case number (if known)

Fill in this info	rmation to identify your	case:		
Debtor 1	Edward Uy Hidal	go		
	First Name	Middle Name	Last Name	
Debtor 2	Trixie Quijada			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	CENTRAL DISTRICT C	DF CALIFORNIA	
Case number				☐ Check if this is an amended filing

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District	Case Number	Date Filed
Riverside	6:17-bk-12522	3/29/17
Riverside	6:15-bk-14188	4/27/15
Riverside	6:14-bk-24872	10/11/14
Riverside	6:13-bk-30279	12/20/13
Riverside	6:10-bk-48905	12/02/10
Riverside	6:10-bk-18120	3/22/10

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

Chapter 7, filed 3/22/2010: Case No: 6:10-bk-18120-EC, Discharged 7/8/2010 Chapter 7; filed 12/2/2010; Case No: 6:10-bk-48905-MH, Discharged 8/23/2011 Chapter 13, filed 12/20/2013; Case No: 6:13-bk-30279-WJ, Dismissed 1/29/2014 Chapter 13, filed 10/11/2014; Case No: 6:14-bk-24872-MH, Dismissed 1/23/2015 Chapter 13, filed 4/27/2015; Case No: 6:15-bk-14188-MH, Dismissed 11/17/2016 Chapter 13, filed 3/29/2017; Case No: 6:15-bk-12522-MH, Dismissed 5/3/2017

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

none

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at	Pasadena	, California.	/S/ Edward Uy Hidaigo	
			Edward Uy Hidalgo	
Date:	November 13, 2017		Signature of Debtor	
			/s/ Trixie Quijada	
			Trixie Quijada	
			Signature of Joint Debtor	

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Fill in this infor	mation to identify your	case:	·	
Debtor 1	Edward Uy Hidal	go		
	First Name	Middle Name	Last Name	
Debtor 2	Trixie Quijada			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT C	F CALIFORNIA	
Case number				
(if known)		_		☐ Check if this i amended filin

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	1,583,484.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,680.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,595,164.00
Par	t 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,000,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	62,625.6
	Your total liabilities	\$	1,062,625.65
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	17,899.89
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	13,816.5
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other s	chedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1	Edward Uy Hidalgo	o		
Debtor 2	Trixie Quijada	Case number (if known)		
O F	the Ote town and a five our Ourseast Manufally Income of			

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

22,744.78

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Main L	<u> Document</u> Pa	ge 12 of 55		
-ill in this info	rmation to identify you	r case and this filin	g:			
Debtor 1	Edward Uy Hida	lao				
JODIOI 1	First Name	Middle Name	Last Nam	9	—	
Debtor 2	Trixie Quijada					
Spouse, if filing)	First Name	Middle Name	Last Nam	Э	_	
Inited States E	Bankruptcy Court for the:	CENTRAL DISTR	ICT OF CALIFORNIA			
	., .,				_	
Case number						☐ Check if this is ar
						amended filing
Official F	orm 106A/B					
		oortv.				
cneau	le A/B: Prop	berty				12/15
	e Each Residence, Buildin r have any legal or equitab art 2.	<u></u>				
Ves Where	e is the property?					
	utherland Drive s, if available, or other description		Duplex or multi-unit build	Do the Cre	amount of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
		_	Manufactured or mobile	home		
Redland	s CA 92	373-0000		Cu	rrent value of the	Current value of the
City	State	ZIP Code	Investment property	em	ire property? \$1,583,484.00	portion you own? \$1,583,484.00
Oity	Otate				Ψ1,000,404.00	Ψ1,505,404.00
			_			our ownership interest ancy by the entireties, or
		Who	has an interest in the pro	·	fe estate), if known.	andy by the onthones, of
			Debtor 1 only	Fe	e simple	
San Beri	nardino		Debtor 2 only			
County			Debtor 1 and Debtor 2 o	nly	Observation is at the term	
			At least one of the debto	rs and another	Check if this is com (see instructions)	imunity property
			er information you wish to perty identification numbe	•	ch as local	
		312	sidence: 205 Sutherland Drive dlands, CA 92373			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

	Ca	SE 0.17-	DK-19433-MII I	Main Document Page 13		21.01 Desc
Debtor Debtor		dward Uy l rixie Quijad		main Document Fage 13	Case number (if known)	
3. Cars	s, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles		
□ N	0					
■ Ye						
— Ye	es					
3.1	Make:	Mercede	e	Who has an interest in the property? Check on	Do not deduct secu	red claims or exemptions. Put
	Model:	C Class		Debtor 1 only	the amount of any s	ecured claims on Schedule D: e Claims Secured by Property.
	Year:	2016		Debtor 2 only		
	Approxin	nate mileage:	18,997	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	ne Current value of the portion you own?
		ormation:		☐ At least one of the debtors and another		
				Check if this is community property	\$0.	00 \$0.00
L				(see instructions)		
				n for all of your entries from Part 2, includ that number here		\$0.00
					L	
			onal and Household Ite egal or equitable int	ems terest in any of the following items?		Current value of the
						portion you own? Do not deduct secured claims or exemptions.
Exa	amples: No		furnishings nces, furniture, linens	, china, kitchenware		
— Y	res. De	scribe				
			Furniture			\$2,800.0
		Televisions a	and radios; audio, vide I phones, cameras, m	eo, stereo, and digital equipment; computers, nedia players, games	printers, scanners; music co	llections; electronic devices
ΠY	es. De	scribe				
	amples:		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or ot llectibles	her art objects; stamp, coin,	or baseball card collections;
Y	es. De	scribe				
			Books, Pictures	3		\$200.0
Exa	imples:	for sports a Sports, photo musical instr	graphic, exercise, an	nd other hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes a	nd kayaks; carpentry tools;
	NO					

Official Form 106A/B Schedule A/B: Property page 2

☐ Yes. Describe.....

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Debtor 1 Edward Uy Hidalgo
Debtor 2 Trixie Quijada

Case number (if known)

Case number (if known)

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

D	irixie Quijac	<u>la </u>		wn)
0.	Firearms			
	Examples: Pistols, rifles No	s, shotguns, ammunitio	on, and related equipment	
	☐ Yes. Describe			
1.	Clothes Examples: Everyday cl	othes, furs, leather coa	ats, designer wear, shoes, accessories	
	Yes. Describe			
		Clathing		\$900.00
		Clothing		
12.	Jewelry Examples: Everyday je □ No ■ Yes. Describe	welry, costume jewelry,	, engagement rings, wedding rings, heirloom jewelry, watches, gen	ns, gold, silver
		Jewlery		\$2,000.00
13.	Non-farm animals Examples: Dogs, cats, No Yes. Describe	birds, horses		
14.	Any other personal an	d household items vo	ou did not already list, including any health aids you did not lis	t
	■ No	•	, , , , ,	
	☐ Yes. Give specific inf	ormation		
15			from Part 3, including any entries for pages you have attached	\$5,900.00
Pa	art 4: Describe Your Finan	cial Assets		
Do	o you own or have any I	egal or equitable inte	rest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		your home, in a safe deposit box, and on hand when you file your p	etition
			Cash	\$30.00
_				
	institutions.		ial accounts; certificates of deposit; shares in credit unions, brokera counts with the same institution, list each.	ge houses, and other similar
	□ No ■ Yes		Institution name:	
		17.1.	Bank of America - Checking Account	\$450.00
		17.2.	Etrade Account	\$2,200.00

Official Form 106A/B

Schedule A/B: Property

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Debtor 1 Debtor 2	Edward Uy Hidalgo Trixie Quijada	Case number (if	Case number (if known)		
	17.3.	Fedelity Federal	\$3,100.00		
	s, mutual funds, or publicly traded st ples: Bond funds, investment accounts	tocks with brokerage firms, money market accounts			
☐ Yes.	Institution o	r issuer name:			
joint	oublicly traded stock and interests in venture	incorporated and unincorporated businesses, including an	interest in an LLC, partnership, and		
■ No □ Yes.	. Give specific information about them. Name of entity:):		
Nego	tiable instruments include personal che	ner negotiable and non-negotiable instruments ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.			
☐ Yes.	Give specific information about them Issuer name:				
Exam	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 4	401(k), 403(b), thrift savings accounts, or other pension or profit-s	sharing plans		
■ No □ Yes.	List each account separately. Type of account:	Institution name:			
Your		made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	companies, or others		
■ No □ Yes.		Institution name or individual:			
_	ties (A contract for a periodic payment	of money to you, either for life or for a number of years)			
■ No □ Yes.	Issuer name and descr	iption.			
26 U.S	sts in an education IRA, in an accour .C. §§ 530(b)(1), 529A(b), and 529(b)(nt in a qualified ABLE program, or under a qualified state tuit 1).	ion program.		
■ No □ Yes.	Institution name and de	escription. Separately file the records of any interests.11 U.S.C. §	521(c):		
■ No		perty (other than anything listed in line 1), and rights or pow	ers exercisable for your benefit		
	. Give specific information about them.				
		crets, and other intellectual property s, proceeds from royalties and licensing agreements			
☐ Yes.	. Give specific information about them.				
	ses, franchises, and other general in ples: Building permits, exclusive licens	stangibles es, cooperative association holdings, liquor licenses, professiona	ıl licenses		
☐ Yes.	. Give specific information about them.				
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured		

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

	Case 6:17-0K-19433-MH	Main Document	Page 16 of 55	27:07 Desc
Debtor 1 Debtor 2	Edward Uy Hidalgo Trixie Quijada		Case number (if known)	
28. Tax re	funds owed to you			
■ No				
⊔ Yes	. Give specific information about them,	including whether you alread	ly filed the returns and the tax years	
Exan	y support oples: Past due or lump sum alimony, s	pousal support, child support	, maintenance, divorce settlement, property	settlement
■ No □ Yes	. Give specific information			
00	. Orvo oposino informationi			
Exan	amounts someone owes you apples: Unpaid wages, disability insurand benefits; unpaid loans you made		its, sick pay, vacation pay, workers' comper	nsation, Social Security
■ No □ Yes	. Give specific information			
	·			
	sts in insurance policies oples: Health, disability, or life insurance	e; health savings account (H	SA); credit, homeowner's, or renter's insurar	nce
■ Yes	. Name the insurance company of eacl Company nam		Beneficiary:	Surrender or refund value:
	Life Insuran	ce - Term		\$0.00
If you some	one has died.		rrance policy, or are currently entitled to rece	eive property because
⊔ Yes	. Give specific information			
	s against third parties, whether or naples: Accidents, employment disputes			
_	. Describe each claim			
34. Other	contingent and unliquidated claims	of every nature, including	counterclaims of the debtor and rights to	set off claims
■ No				
☐ Yes	Describe each claim			
_ `	nancial assets you did not already l	ist		
■ No □ Yes	. Give specific information			
	the dollar value of all of your entries art 4. Write that number here		entries for pages you have attached	\$5,780.00
Part 5: D	escribe Any Business-Related Property Y	ou Own or Have an Interest In.	List any real estate in Part 1.	
37. Do yo u	own or have any legal or equitable interes	est in any business-related pro	perty?	
	o to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishi you own or have an interest in farmland, list		or Have an Interest In.	

 $46. \ \, \textbf{Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?}$

No. Go to Part 7.

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Deb	tor 1 tor 2	Edward Uy Hidalgo Trixie Quijada		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
		have other property of any kind you did not already list? les: Season tickets, country club membership			
	No				
] Yes. (Give specific information			
54.	Add th	he dollar value of all of your entries from Part 7. Write that	number here		\$0.00
					<u> </u>
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$1,583,484.00
56.	Part 2	: Total vehicles, line 5	\$0.00		
57.	Part 3	: Total personal and household items, line 15	\$5,900.00		
58.	Part 4	: Total financial assets, line 36	\$5,780.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$11,680.00	Copy personal property total	\$11,680.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$1,595,164.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this information to identify your case:							
Debtor 1	Edward Uy Hidal	go					
	First Name	Middle Name	Last Name				
Debtor 2	Trixie Quijada						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		CENTRAL DISTRICT C	F CALIFORNIA				
Case number (if known)				☐ Check if this is an amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

נטנ	ne applicable statutory amount.					
Pa	rt 1: Identify the Property You Claim as E	xempt				
1.	Which set of exemptions are you claiming?	? Check one only, evel	n if yo	our spouse is filing with you.		
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	31205 Sutherland Drive Redlands, CA	\$1,583,484.00		\$100,000.00	C.C.P. § 704.730	
	92373 San Bernardino County Residence: 31205 Sutherland Drive Redlands, CA 92373 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	-	
	Furniture	\$2,800.00		\$2,800.00	C.C.P. § 704.020	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Books, Pictures Line from Schedule A/B: 8.1	\$200.00		\$200.00	C.C.P. § 704.020	
	Line from Schedule AVB: 0.1			100% of fair market value, up to any applicable statutory limit		
	Clothing	\$900.00		\$900.00	C.C.P. § 704.020	
	Line from Schedule A/B: 11.1			100% of fair market value, up to		

Jewlery

Line from Schedule A/B: 12.1

\$2,000.00

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$2,000.00

C.C.P. § 704.040

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Trixie Quijada Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash C.C.P. § 704.070 \$30.00 \$30.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Bank of America - Checking Account** C.C.P. § 704.070 \$450.00 \$275.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Etrade Account** C.C.P. § 704.070 \$2,200.00 \$2,200.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Fedelity Federal** C.C.P. § 704.070 \$3,100.00 \$3,100.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Edward Uy Hidalgo

Debtor 1

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Cuse 0.17 BK 13	Main Documen	t Page	20 of 55	<i>711 11.21.01</i>	D C30
Fill in this information to identify					
Debtor 1 Edward Uy H	lidalgo				
First Name	Middle Name	Last Name		-	
Debtor 2 Trixie Quijac	a				
(Spouse if, filing) First Name	Middle Name	Last Name		•	
United States Bankruptcy Court for	the: CENTRAL DISTRICT OF CAL	LIFORNIA			
Case number					
(if known)				_	if this is an
				amend	ded filing
Official Form 106D					
	rs Who Have Claims	Sociron	h by Droport	.,	40/45
Schedule D. Credito	ors who have Claims	Secured	a by Propert	<u>y </u>	12/15
	ole. If two married people are filing toget Il it out, number the entries, and attach it				
Do any creditors have claims secure	d by your property?				
	nit this form to the court with your othe	er schedules. Yo	ou have nothing else t	o report on this form.	
_	•	or correction. The	sa navo notimig oloo i	o report or time rorm.	
Yes. Fill in all of the informat					
Part 1: List All Secured Claims	i		Column A	Column B	Column C
	has more than one secured claim, list the cr has a particular claim, list the other credito		Amount of claim	Value of collateral	Unsecured
	betical order according to the creditor's nar		Do not deduct the	that supports this	portion
HSBC Bank, USA / Wells			value of collateral.	claim	If any
2.1 Fargo Bank	Describe the property that secures	the claim:	\$1,000,000.00	\$1,583,484.00	\$0.00
Creditor's Name	31205 Sutherland Drive Red	dlands,			
	CA 92373 San Bernardino	County			
Attention: Bankruptcy	Residence:				
Department	31205 Sutherland Drive				
MAC# D3347-014	Redlands, CA 92373 As of the date you file, the claim is	: Check all that			
3476 Stateview Blvd.	apply.	- Chook an that			
Fort Mill, SC 29715	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as		ured		
Debtor 2 only	car loan)	inortgage or see	uica		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and anoth	_	,			
Check if this claim relates to a community debt	Other (including a right to offset)	First Mortg	age		

Add the dollar value of your entries in Column A on this page. Write that number here: \$1,000,000.00 If this is the last page of your form, add the dollar value totals from all pages. \$1,000,000.00 Write that number here:

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

9544

Date debt was incurred

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Fill in this info	rmation to identify your	case:				
Debtor 1	Edward Uy Hidalo	10				
200101	First Name	Middle Name	Last Name		-	
Debtor 2	Trixie Quijada					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIF	ORNIA		-	
Case number (if known)					_	heck if this is an mended filing
Official For						
Schedule	E/F: Creditors W	/ho Have Unsecured (Claims			12/15
Schedule D: Cred left. Attach the Co name and case n	ditors Who Have Claims Secontinuation Page to this pagumber (if known).	ired Leases (Official Form 106G). Do ured by Property. If more space is no le. If you have no information to repo	eded, copy t	he Part you need, fill it o	out, number the ent	ries in the boxes on the
	All of Your PRIORITY Un					
	itors have priority unsecure	d claims against you?				
No. Go to	Part 2.					
☐ Yes.						
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cred	itors have nonpriority unsec	cured claims against you?				
☐ No. You h	nave nothing to report in this p	art. Submit this form to the court with yo	our other sche	dules.		
Yes.						
unsecured cl	aim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, i ist the other creditors in Part 3.If you ha	dentify what t	ype of claim it is. Do not lis	st claims already inc	luded in Part 1. If more
						Total claim
4.1 Atlas	Acquisitions LLC	Last 4 digits of accou	unt number	9280		\$491.46
Nonprio	rity Creditor's Name nion Street	When was the debt in	ncurred?	4/22/2013		<u> </u>
	ensack, NJ 07601	A - of the data fil	. 411-::	01 1 11/1 / 1		
	Street City State Zlp Code curred the debt? Check one.	As of the date you fil	e, the claim i	s: Check all that apply		
	for 1 only	_				
	or 2 only	☐ Contingent				
_	-	☐ Unliquidated —				
	tor 1 and Debtor 2 only	☐ Disputed	m.,			
	ast one of the debtors and and	<u> </u>	Y unsecured	ı claim:		
■ Ched	ck if this claim is for a comr	<u> </u>				
	laim subject to offset?	☐ Obligations arising report as priority claim		ration agreement or divor	ce that you did not	
■ No	-			g plans, and other similar	debts	
☐ Yes		Other. Specify C				
00		— Outer, Specify				

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Calvary SPV I, LLC Nonpriority Creditor's Name	Last 4 digits of account number	1892	\$851.46					
600 Summit Lake Drive, Suite 400 /alhalla, NY 10595	When was the debt incurred?	12/2012						
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply							
Who incurred the debt? Check one.	<u>_</u>							
Debtor 1 only	Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	Disputed							
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
No	Debts to pension or profit-sharing	ng plans, and other similar debts						
Yes	Other. Specify Consumer	Goods						
Calvary SPV I, LLC	Last 4 digits of account number	6180	\$955.49					
Nonpriority Creditor's Name 500 Summit Lake Drive, Suite 400	When was the debt incurred?	10/2012						
/alhalla, NY 10595								
lumber Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
Debtor 1 only	☐ Contingent							
Debtor 2 only	_							
Debtor 1 and Debtor 2 only	☐ Unliquidated							
_	☐ Disputed Type of NONPRIORITY unsecure	d claim:						
At least one of the debtors and another	☐ Student loans	a Gainn						
☐ Check if this claim is for a community lebt		aration agreement or divorce that you did not						
s the claim subject to offset?	report as priority claims							
No	Debts to pension or profit-sharing	ng plans, and other similar debts						
☐ Yes	Other. Specify Consumer	Goods						
Calvary SPV I, LLC	Last 4 digits of account number	0431	\$2,769.41					
Nonpriority Creditor's Name 500 Summit Lake Drive, Suite 400	When was the debt incurred?	prior to 6/2014						
/alhalla, NY 10595	when was the debt incurred:	prior to 0/2014						
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
No	Debts to pension or profit-sharing	ng plans, and other similar debts						
		goods and services						

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	1 Edward Uy Hidalgo 2 Trixie Quijada		Case number (if know)	
4.5	Curtis Knight Nonpriority Creditor's Name	Last 4 digits of account number	6476	\$16,916.75
	PO Box 460 Walterville, OR 97489	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Commission	on charge back	
4.6	First Source Advantage, LLC	Last 4 digits of account number	0704	\$16,125.10
	Nonpriority Creditor's Name PO Box 628 Buffalo, NY 14240	When was the debt incurred?	10/2012	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Consumer	Goods	
4.7	Merrick Bank	Last 4 digits of account number	0004	\$934.68
	Nonpriority Creditor's Name Resurgent Capital Services PO Box 10368	When was the debt incurred?	11/2013	
	Greenville, SC 29603-0368			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	■ Other Specify Consumer		
	— 103	Otner. Specify		

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	or 1 Edward Uy Hidaigo or 2 <mark>Trixie Quijada</mark>	Case number (if know)	
4.8	Merrick Bank	Last 4 digits of account number 9039	\$979.40
	Nonpriority Creditor's Name Resurgent Capital Services PO Box 10368	When was the debt incurred? 2010	***************************************
	Greenville, SC 29603-0368 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
	Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Consumer Goods	
4.9	North American Company Nonpriority Creditor's Name	Last 4 digits of account number 6476	\$0.00
	4350 Westown Parkway Panora, IA 50216	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify DUPLICATE CLAIM	
4.1 0	Prudential Financial	Last 4 digits of account number 0134	\$14,571.38
	Nonpriority Creditor's Name Stuart Allan & Associates, Inc. 5447 E. 5th Street, Suite 110 Tucson, AZ 85711	When was the debt incurred? 8/2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Disputed Business Debt	

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Debtor Debtor	1 Edwa 2 Trixio		y Hidalgo jada			Case n	number (if	know)		
4.1			ates, LLC	Last 4 digits of a	count number	9568		_	_	\$7,797.88
		neto	ditor's Name onka Road	When was the de	bt incurred?					
			City State Zlp Code	As of the date yo	u file, the claim i	s: Check	call that ap	ylq		
	Who incu	ırred t	he debt? Check one.	_	•		•	. ,		
	☐ Debto	r 1 only	y	☐ Contingent						
	☐ Debto	r 2 onl	y	☐ Unliquidated						
	■ Debto	r 1 and	d Debtor 2 only	☐ Disputed						
	_		of the debtors and another	Type of NONPRIC	ORITY unsecured	d claim:				
	_		s claim is for a community	☐ Student loans						
	debt		bject to offset?	Obligations aris		ration ag	reement o	r divorce that you	ı did not	
	■ No	oui	0,000 10 0110011	Debts to pension		n nlane :	and other	similar dehts		
	■ No			Debts to pension		01 /		ncial Service	_	
	☐ Yes			Other. Specify	Acct # 2001	les bei	nz Finai	iciai Service	s 	
4.1			Bank, N.A.	Last 4 digits of a	count number	7175		_	_	\$232.64
	PO Box	450		When was the de	bt incurred?	prior	to 6/20	14		
	_		e, FL 32231-5038							
•			City State ZIp Code	As of the date yo	u file, the claim i	s: Check	call that ap	pply		
	_		he debt? Check one.							
	☐ Debto		•	☐ Contingent						
	Debto		•	☐ Unliquidated						
	_		Debtor 2 only of the debtors and another	☐ Disputed Type of NONPRICE	ORITY unsecured	d claim:				
	☐ Check	c if this	s claim is for a community	☐ Student loans						
	debt Is the cla	im sul	bject to offset?	Obligations aris		ration ag	reement o	r divorce that you	u did not	
	No			Debts to pension	on or profit-sharin	g plans, a	and other	similar debts		
	☐ Yes			Other. Specify	Consumer	goods	and se	vices		
Part 3:	List C	thers	to Be Notified About a Debt 1	hat You Already	Listed					
is tryii have r	ng to colle	ct froi	ou have others to be notified about myou for a debt you owe to some reditor for any of the debts that you in Parts 1 or 2, do not fill out or su	one else, list the or u listed in Parts 1 o	iginal creditor in	Parts 1	or 2, then	list the collection	on agency l	here. Similarly, if you
Part 4:	Add t	he Ar	nounts for Each Type of Unse	cured Claim						
	the amour f unsecur		certain types of unsecured claims im.	This information is	s for statistical re	eporting	purposes	only. 28 U.S.C.	§159. Add	the amounts for each
								Total Claim		
	Γotal	6a.	Domestic support obligations			6a.	\$		0.00	
from P	aims art 1	6b.	Taxes and certain other debts yo	u owe the governm	ent	6b.	\$		0.00	
		6c.	Claims for death or personal inju	ry while you were i	ntoxicated	6c.	\$		0.00	
		6d.	Other. Add all other priority unsecu	red claims. Write tha	t amount here.	6d.	\$		0.00	
		6e.	Total Priority. Add lines 6a through	n 6d.		6e.	\$		0.00	
		6f.	Student loans			6f.	\$	Total Claim	0.00	
	Total aims						-			

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Debtor 1 Edv Debtor 2 Trix		y Hidalgo jada	Case r	umber (if know)		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	62,625.65	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	62,625.65	

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Fill in this infor	mation to identify your	case:				
Debtor 1 Edward Uy Hidalgo						
	First Name	Middle Name	Last Name			
Debtor 2	Trixie Quijada					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA			
Case number (if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Octavius Quijada

State what the contract or lease is for
Mercedes C Class

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		Main Docui	nent Page 2	8 01 55	
Fill in this i	nformation to identify your	case:			
Debtor 1	Edward Uy Hidal	90			
DODIOI I	First Name	Middle Name	Last Name		
Debtor 2	Trixie Quijada				
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case numbe	er				
(if known)					☐ Check if this is an amended filing
Official	Form 106H				
Schedu	ıle H: Your Cod	ebtors			12/15
people are fi ill it out, and our name a	iling together, both are equ	ally responsible for supp boxes on the left. Attach Answer every question	olying correct informat In the Additional Page t	tion. If more space is ned to this page. On the top o	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
	ou have any codebiors: (II	you are ming a joint case,	do not list etiner spouse	as a codebior.	
■ No □ Yes					
Arizona	n the last 8 years, have you , California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
3. In Colu	mn 1, list all of your codeb 2 again as a codebtor only 06D), Schedule E/F (Officia	ors. Do not include your f that person is a guaran	spouse as a codebtor	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
_	olumn 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
	ame			Schedule E/F, line	
				☐ Schedule G, line	
				Schedule G, line	
	umber Street ity	State	ZIP Code		
3.2	omo			Schedule D, line	·
Na	ame			☐ Schedule E/F, line	e
				☐ Schedule G, line	
N	umber Street			_	
Ci	ity	State	ZIP Code		

Fill in this informat	ion to identify your case:	
Debtor 1	Edward Uy Hidalgo	
Debtor 2 (Spouse, if filing)	Trixie Quijada	
United States Ban	kruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapte
Official Fo	rm 106l	13 income as of the following date: MM / DD/ YYYY

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

12/15

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Life Annuity Masters Insurance Director/Foundation** Include part-time, seasonal, or self-employed work. **Employer's name** 159 Parrot Lane, Suite 200 **Casa Colina Hospital Employer's address** Occupation may include student 255 E Bonita Avenue or homemaker, if it applies. Simi Valley, CA 93065 Pomona, CA 91769 How long employed there? 7 months 1 year 2 months

Part 2: Give Details About Monthly Income

Schedule I: Your Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 15,861.78 6,833.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. +\$ 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 15,861.78 6,833.00

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Edward Uy Hidalgo Trixie Quijada	-	(Case	number (if know	7) _				
					For	Debtor 1			Debtor 2 o		
	Cop	y line 4 here	4.		\$	15,861.7	8	\$	6,833		
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	3,300.0	0	\$	1,010).89	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.0		\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c	: .	\$	0.0	0	\$	(0.00	
	5d.	Required repayments of retirement fund loans	5d	i.	\$	0.0	0	\$	(0.00	
	5e.	Insurance	5e		\$_	0.0	_	\$		5.00	
	5f.	Domestic support obligations	5f.		\$_	0.0	_	\$		0.00	
	5g.	Union dues Other deductions, Specific Incomes	5g		\$_ \$	0.0	_			0.00	
_	5h.	Other deductions. Specify: Insurance	_	1.+	· —	0.0	_			9.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	3,300.0		\$	1,594		
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	12,561.7	8_	\$	5,238	<u>3.11</u>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$_	0.0		\$		0.00	
	8b.	Interest and dividends	8b).	\$	0.0	0	\$	(0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$	0.0	0	\$	(0.00	
	8d.	Unemployment compensation	8d	i.	\$	0.0	0	\$	(0.00	
	8e.	Social Security	8e) .	\$	0.0	0	\$	(0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.0		\$		0.00	
	8g.	Pension or retirement income	8g		\$_	0.0	_	\$		0.00	
	8h.	Other monthly income. Specify: Residual Income - Ward & Brown	_ 8h	1.+	\$_	100.0	0 +	+ \$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	(\$	100.0	0	\$		0.00	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	1	2,661.78 +	\$	5.2	38.11 =	- 1	7,899.89
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		2,001110	*-		00.11		,,000.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•			chedule J. 11. +\$	 5	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							12. \$	1	7,899.89
13.	Do	you expect an increase or decrease within the year after you file this form	?							mbine onthly	ed income
		No.									
	П	Yes. Explain:									

Debtor 1 Edward Uy Hidalgo An amended filing An amended filing A supplement showing postposition chapter Sepoute, filling) An amended filing A supplement showing postposition chapter Sepoute, filling) An amended filing A supplement showing postposition chapter Sepoute, filling) An amended filing A supplement showing postposition chapter Sepoute, filling) An amended filing A						1				
Debtor 2 Trixic Quijada An amended filing	Fill in this inform	ation to identify yo	our case:							
Debtor 2 Tricke Quijada A supplement showing postpetion chapter (13 expenses as of the following date:	Debtor 1	Edward Uy H	−lidalgo			Ch				
Spouse, if filing 13 expenses as of the following date: MM / DD / YYYY	D.1.		_		_			_		
United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Parts: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 must file Official Form 106J-2. Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Yes. Fill out this information for each dependent anames. Son B Pyes No. Ves. Son B Pyes No. Ves. Ves. No. Ves. No. Ves. Ves. No. Ves. No. Ves. No. Ves. No. Ves. Ves. No. Ves. Ves. No. Ves. No. Ves. No. Ves. Ves. No. Ves. No. Ves. Ves. No. Ves. No. Ves. No. Ves. No. Ves. Ves. No. Ves. No. Ves. Ves. No. No. Ves. No. Ves. No. Vour expenses as of your bankruptcy lifting date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of your bankruptcy lifting date unless you are using this form as a supplement in a Chapt		Trixie Quijac	ıa							pter
Case number (It known) Common	(Opouse, ii iiiiig)							<i>-</i>		
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part I: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Debtor 2 live in a separate household? No. On to list pebtor 1 and Pyes. Fill out this information for each dependent each dependent seed dependent and better 2. Do not list better 1 and Pyes. Son 8 8 Yes Do not state the dependents names. Son 8 8 Yes No. No. On the state the dependents of a date after the bankruptcy lifting date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of your bankruptcy lifting date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) The rental or home ownership expenses for your residence, include first mortgage payments and any rent for the ground or lot. He not included in line 4: 4a. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 1,000 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00	United States Ban	kruptcy Court for the	: CENTR	AL DISTRICT OF CALIFO	RNIA		М	M / DD / YYYY		
Official Form 106J Schedule J: Your Expenses Be as complete and accuret as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part !: Describe Your Household 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Pyes. Fill out this information for Debtor 1 or Debtor 2. Do not state the dependents names. Son 8 Pyes No. No. Or	Case number									
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household	(If known)									
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household										
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ratt Describe Your Household	Official Fo	orm 106.J								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part : Describe Your Household			Evnor	1606						40/4
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Pat Describe Your Household					e filing together he	oth are e	nuall	v responsible fo	or supplying correc	
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents? Do not state the dependents names. Son Boyour expenses include expenses of people other than yourself and your dependents: No No Yes No	information. If I	nore space is ne	eded, atta	ch another sheet to this						
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Do not list Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son B Yes. Son Dependent's relationship to Debtor 1 or Debtor 2 Do not state the dependents names. Son B Yes No Yes Thick this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 150.00 4d. Homeowner's association or condominium dues	Part 1: Desc	ribe Your House	hold							
Yes. Does Debtor 2 live in a separate household? No										
No	☐ No. Go	to line 2.								
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Do not state the dependent names. Son 8 Yes	Yes. Do	es Debtor 2 live i	in a separa	ate household?						
2. Do you have dependents?		No								
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son Bependent's relationship to Debtor 2 age No No No Yes No No No No Yes No No No No No No No N		Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebto	r 2.		
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son Bependent's relationship to Debtor 2 age No No No Yes No No No No Yes No No No No No No No N	2 Do you ha	ve denendents?	Пио							
Debtor 2. Debtor 1 or Debtor 2 age live with you? Do not state the dependents names. Son 8 Pyes No No Yes No No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate Your ongoing Monthly Expenses Estimate Your ongoing Monthly Expenses Estimate your expenses as of a date after the bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.000	•	•		Fill out this information for	Domon dontio voleti	ionobin to		Demandant's	Daga damandant	
Both of state the dependents names. Son 8		Deptor 1 and	Yes.					•	live with you?	
Both of state the dependents names. Son 8	5								П №	
No Yes					Son			8	= ::-	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 120.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00							_			
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2:									☐ Yes	
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00										
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expenses of people other than your dependents?	3. Do your ex	penses include		No					□ 163	
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 1,416.00 120.00 4d. Homeowner's association or condominium dues			han 🗖							
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 1,416.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 150.00 4d. Homeowner's association or condominium dues	yourself al	na your aepenae	nts? —	. 55						
expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 1,416.00 120.00 4d. Homeowner's association or condominium dues								alamantin a Cha		
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 7,529.50 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00	expenses as of	a date after the l								
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4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 7,529.50 4. \$ 1,416.00 4b. \$ 120.00 4c. Homeowner's association or condominium dues 4d. \$ 0.00	the value of su	ch assistance an						Vaur ava		
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 7,529.50 4a. \$ 1,416.00 4b. \$ 120.00 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00	(Official Form 1	06I.)					_	Your exp	enses	
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4. \$ 7,529.50 4a. \$ 1,416.00 4b. \$ 120.00 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00	4 The rental	or home owners	hin eynen	ses for your residence to	nclude first mortaag	۵				
4a.Real estate taxes4a.\$1,416.004b.Property, homeowner's, or renter's insurance4b.\$4c.Home maintenance, repair, and upkeep expenses4c.\$4d.Homeowner's association or condominium dues4d.\$	payments a	and any rent for the	e ground o	r lot.	ncidde inst mortgage	4.	\$		7,529.50	
4b.Property, homeowner's, or renter's insurance4b.\$120.004c.Home maintenance, repair, and upkeep expenses4c.\$150.004d.Homeowner's association or condominium dues4d.\$0.00	If not inclu	ded in line 4:								
4b.Property, homeowner's, or renter's insurance4b.\$120.004c.Home maintenance, repair, and upkeep expenses4c.\$150.004d.Homeowner's association or condominium dues4d.\$0.00	4a. Real	estate taxes				4a.	\$		1,416.00	
4d. Homeowner's association or condominium dues 4d. \$ 0.00		•							120.00	
					me equity loans				-	

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Debtor 1 Debtor 2		Edward Trixie Q	Uy Hidalgo uijada	Case number (if known)					
6	Utilit	tion.							
6.	6a.		, heat, natural gas	6a.	\$	375.00			
	6b.	•	ewer, garbage collection	6b.	·	54.00			
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	300.00			
	6d.	Other. Sp		6d.	\$	0.00			
7.	Food		sekeeping supplies	7.	\$	900.00			
8.	Child	dcare and o	children's education costs	8.	\$	630.00			
9.	Clot	hing, laund	dry, and dry cleaning	9.	\$	200.00			
10.	Pers	onal care p	products and services	10.	\$	80.00			
11.	Medi	ical and de	ental expenses	11.	\$	100.00			
12.	Tran	sportation	Include gas, maintenance, bus or train fare.			500.00			
			car payments.	12.	·	500.00			
			clubs, recreation, newspapers, magazines, and books	13.	·	200.00			
14.			tributions and religious donations	14.	\$	0.00			
15.		rance.	nourones deducted from your new or included in lines 4 or 20						
		Life insura	nsurance deducted from your pay or included in lines 4 or 20.	15a.	\$	500.00			
		Health ins		15a. 15b.	· ·	0.00			
		Vehicle in		15c.	·	210.00			
			urance. Specify:	15d.	·	0.00			
16			nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00			
10.	Spec		nelidae taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00			
17.	Insta	allment or l	lease payments:						
			nents for Vehicle 1	17a.	·	552.07			
			nents for Vehicle 2	17b.	·	0.00			
		Other. Sp		17c.	· · ·	0.00			
		Other. Sp	• • • • • • • • • • • • • • • • • • • •	17d.	\$	0.00			
18.			s of alimony, maintenance, and support that you did not repo		¢	0.00			
10			your pay on line 5, Schedule I, Your Income (Official Form 1	1061).	\$	0.00			
19.			s you make to support others who do not live with you.	19.	Φ	0.00			
20	Spec	,	perty expenses not included in lines 4 or 5 of this form or on		our Income				
20.			s on other property	20a.		0.00			
		Real estat		20b.		0.00			
			homeowner's, or renter's insurance	20c.	· ·	0.00			
			nce, repair, and upkeep expenses	20d.	·	0.00			
			ner's association or condominium dues	20e.	· ·	0.00			
21.	Othe	er: Specify:			+\$	0.00			
22.			monthly expenses						
			through 21.		\$	13,816.57			
	22b.	Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 100	6J-2	\$				
	22c.	Add line 22	2a and 22b. The result is your monthly expenses.		\$	13,816.57			
23.	Calc	ulate your	monthly net income.						
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	17,899.89			
	23b.	Copy you	r monthly expenses from line 22c above.	23b.	-\$	13,816.57			
	220	Subtract	your monthly expenses from your monthly income.						
	230.		t is your <i>monthly net income</i> .	23c.	\$	4,083.32			
0.4	D -		on the second of						
24.			an increase or decrease in your expenses within the year af ou expect to finish paying for your car loan within the year or do you expe			e or decrease because of a			
			e terms of your mortgage?	,	. ,				
	■ N	lo.							
	□ Y	es.	Explain here:						

Fill in this info	rmation to identify your			
Debtor 1	Edward Uy Hidal	-		
	First Name	Middle Name Last	Name	
Debtor 2	Trixie Quijada			
(Spouse if, filing)	First Name	Middle Name Last	Name	
United States B	Bankruptcy Court for the:	CENTRAL DISTRICT OF CALIFORI	NIA	
Case number				
(if known)				☐ Check if this is an
()				amended filing
If two married p You must file th obtaining mone	people are filing togethe	n Individual Debtom, both are equally responsible for some side bankruptcy schedules or amended in connection with a bankruptcy case 1519, and 3571.	upplying correct information.	
Sig	gn Below			
Did you p	ay or agree to pay some	one who is NOT an attorney to help	you fill out bankruptcy forms?	
■ No				
☐ Yes.	Name of person			kruptcy Petition Preparer's Notice,
			Declaration	, and Signature (Official Form 119)
	alty of perjury, I declare	that I have read the summary and so	chedules filed with this declaration	on and
X /s/ Ed	ward Uy Hidalgo	х	/s/ Trixie Quijada	
	rd Uy Hidalgo		Trixie Quijada	
Signati	ure of Debtor 1		Signature of Debtor 2	
Date	November 13, 2017		Date November 13, 2017	

Fill	n this inforr	nation to identify you	r case:			
Debt	tor 1	Edward Uy Hida				
Debt	tor 2	First Name	Middle Name	Last Name		
	se if, filing)	Trixie Quijada First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA		
Case (if kno	e number _ wn)				_	theck if this is an mended filing
Sta Be as	tement	and accurate as poss		are filing together, both are	Sankruptcy equally responsible for sup y additional pages, write you	
numb	oer (if know	n). Answer every que	stion.	•		
Part	1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married □ Not mai					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
ĺ	_	st all of the places you	ived in the last 3 years. Do no	ot include where you live nov	٧.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
	■ No					
ĺ	_	ake sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
		•	`	,		
Part	2 Explai	in the Sources of You	r Income			
I	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
For	last calenda	r year:	■ Wages, commissions,	\$130,000.00	■ Wages, commissions,	\$55,000.00

bonuses, tips

☐ Operating a business

bonuses, tips

☐ Operating a business

(January 1 to December 31, 2016)

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	ebtor 1 Edward Uy Hidalgo Ebtor 2 Trixie Quijada Cas					e number (if known)			
					-				
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2015)		■ Wages, commissions, bonuses, tips	\$44,453.00	■ Wages, commissions, bonuses, tips \$45,000.					
					☐ Operating a business		☐ Operating a b	ousiness	
			lar year: December	31, 2014)	■ Wages, commissions, bonuses, tips	\$42,500.00	■ Wages, commonutes with the wages was a wages with the wages was a wage wa	nissions,	\$43,000.00
					☐ Operating a business		☐ Operating a b	ousiness	
\ 	winn	ings. I each s No	f you are fili	ing a joint cas	pensions; rental income; inter se and you have income that yource separa	ou received together, list it	only once under De that you listed in line	btor 1.	
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
Part	3.	l ict	Cortain Da	vments Vou	Made Before You Filed for	ŕ			
S		either No.	Debtor 1's Neither Deindividual properties During the No. Yes * Subject	s or Debtor 2 ebtor 1 nor Debtor 1 nor Debtor 2 nor Debto	es debts primarily consumer personal, family, or househouter you filed for bankruptcy, disconditional to the condition of the	r debts? Imer debts. Consumer delated purpose." d you pay any creditor a too d a total of \$6,425* or more this for domestic support oblinis bankruptcy case. Is after that for cases filed our mer debts.	tal of \$6,425* or more in one or more paying igations, such as chi	e? ments and t ild support a	he total amount you and alimony. Also, do
			☐ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Cre	ditor'	s Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for

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	tor 1 tor 2	Edward Uy Hidalgo Trixie Quijada			Ca	ise number (ii	known)				
	<i>Inside</i> of wh	in 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artner: conti	s; relatives of any gentrol, or owner of 20% of	neral partners; partn or more of their votin	nerships of whing securities;	nich yo and ar	u are a genera ny managing a	al partner; corporations gent, including one for		
		No Yes. List all payments to an insider.									
	Insid	der's Name and Address	Da	tes of payment	Total amount paid	Amount still	-	Reason for	this payment		
	insid	Vithin 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an asider? Include payments on debts guaranteed or cosigned by an insider.									
	_	No									
		Yes. List all payments to an insider der's Name and Address	Da	tes of payment	Total amount	Amount	•	Reason for	this payment		
					paid	still	owe	include cred	itor's name		
Part	4:	Identify Legal Actions, Repossession	ns, ar	nd Foreclosures							
	List a modif	in 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No Yes, Fill in the details.									
	Case	e title e number	Na	ture of the case	Court or agency	/		Status of th	e case		
			n 1 year before you filed for bankruptcy, was any of your property repossessed k all that apply and fill in the details below.			foreclosed,	garnis	hed, attached	I, seized, or levied?		
	_	No. Go to line 11.									
		Yes. Fill in the information below.									
	Cred	litor Name and Address	De	scribe the Property			Date		Value of the property		
			Ex	plain what happene	d						
	acco	n 90 days before you filed for bankrup unts or refuse to make a payment bec			cluding a bank or fi	inancial inst	itution	, set off any a	mounts from your		
		Yes. Fill in the details. Iitor Name and Address	De	scribe the action th				Date action was Amoun			
		n 1 year before you filed for bankrupt appointed receiver, a custodian, or a			erty in the possess	sion of an as	taken ssigne		efit of creditors, a		
	_	-appointed receiver, a custodian, or a	moun	er official?							
		Yes									
Part	5:	List Certain Gifts and Contributions									
13.	_	n 2 years before you filed for bankrup	otcy, o	did you give any gift	s with a total value	e of more tha	an \$60	0 per person?	?		
	_ `	Yes. Fill in the details for each gift.									
	Gifts	s with a total value of more than \$600 person		Describe the gifts			Dates the gi	s you gave ifts	Value		
		son to Whom You Gave the Gift and ress:									

De	btor 2 Trixie Quijada		C	ase number (if known)	
14.	Within 2 years before you filed for bank			s with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed		Dates you contributed	Value
Pa	rt 6: List Certain Losses					
15.	Within 1 year before you filed for banks or gambling?	ruptcy o	r since you filed for bankruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Includ	ibe any insurance coverage for the load the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfe	ers				
16.	Within 1 year before you filed for banks consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid	r prepari	ing a bankruptcy petition?	ices required		rty to anyone you Amount of
	Address Email or website address Person Who Made the Payment, if Not	You	transferred		or transfer was made	payment
	Abacus Credit Counseling		\$25.00		12/4/2014	\$25.00
17.	Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer th	editors of	or to make payments to your creditors		r transfer any prope	rty to anyone who
	No					
	Yes. Fill in the details.		Description and order of accounts		D-1	A
	Person Who Was Paid Address		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you line to both outright transfers and transfer include gifts and transfers that you have a limit No limit Yes. Fill in the details.	our busi i ers made	ness or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred	payments	any property or received or debts	Date transfer was made
	Person's relationship to you			paid in ex	cnange	
19.	Within 10 years before you filed for bar beneficiary? (These are often called ass			lf-settled tru	st or similar device	of which you are a
	NoYes. Fill in the details.					
	Name of trust		Description and value of the proper	rty transferr	ed	Date Transfer was made

Debtor 1 Edward Uy Hidalgo Debtor 2 Trixie Quijada

Case number (if known)

Pa	t 8:	List of Certain Financial Accounts, I	nstrur	nents, Safe Depos	it Boxes, and St	orage Un	its			
20.	sol	hin 1 year before you filed for bankrupt d, moved, or transferred? lude checking, savings, money market,	•	•					, ,	
	houses, pension funds, cooperatives, associations, and other financial institutions. No									
		Yes. Fill in the details.								
		me of Financial Institution and Idress (Number, Street, City, State and ZIP de)		st 4 digits of count number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer	
21.		Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
		No								
		Yes. Fill in the details.								
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)			e the contents		Do you still have it?	
22.	Hav	ve you stored property in a storage unit	or pl	ace other than you	ır home within 1	year befo	ore you filed for bankrupt	су?		
		No								
ĺ		Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City,						Do you still have it?			
				State and ZIP Code)						
Pa	t 9:	Identify Property You Hold or Control	ol for	Someone Else						
23.		Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	_									
		No								
	Ц	Yes. Fill in the details.			_	_				
		vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Describe	e the property		Value	
Pai	t 10:	Give Details About Environmental In	forma	ation						
ıα	. 10	Olve Details About Environmental in		111011						
	the p	ourpose of Part 10, the following defini	tions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
		e means any location, facility, or proper own, operate, or utilize it, including disp	-	-	environmental l	aw, whet	her you now own, operat	e, o	r utilize it or used	
		<i>tardous material</i> means anything an en ardous material, pollutant, contaminan			as a hazardous	waste, h	azardous substance, toxi	ic s	ubstance,	
Rep	ort a	all notices, releases, and proceedings t	hat yo	ou know about, reg	gardless of when	they occ	curred.			
24.	Has	any governmental unit notified you the	at you	ı may be liable or	ootentially liable	under or	in violation of an environ	me	ntal law?	
		No Yes. Fill in the details.								
		Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it					Date of notice			
				••••						

Case 6:17-bk-19433-MH Doc 1 Filed 11/13/17 Entered 11/13/17 17:27:07 Page 39 of 55 Main Document **Edward Uy Hidalgo** Debtor 1 Debtor 2 Trixie Quijada Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Edward Uy Hidalgo /s/ Trixie Quijada **Edward Uy Hidalgo** Trixie Quijada Signature of Debtor 1 Signature of Debtor 2 Date November 13, 2017 Date November 13, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Edward Uy Hidalgo Debtor 2 Trixie Quijada

Case number (if known)

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Central District of California

In	Edward Uy Hidalgo re Trixie Quijada		Case No.		
	Titale Quijada	Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered	or to
	For legal services, I have agreed to accept		\$	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	sation with any other person	unless they are mem	bers and associates of my lav	w firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				n. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspect	s of the bankruptcy of	ase, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemer.c. Representation of the debtor at the meeting of creditors	nent of affairs and plan which	may be required;		
	d. [Other provisions as needed] Negotiations with secured creditors to rec	_		_	of
	reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on hous	s as needed; preparation	and filing of moti	ons pursuant to 11 USC	
6.	By agreement with the debtor(s), the above-disclosed fee defended Representation of the debtors in any disclary other adversary proceeding.	loes not include the following hargeability actions, judi	service: cial lien avoidanc	es, relief from stay actio	ns or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any as bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in
	November 13, 2017	/s/ KEITH F ROUS	SE		
-	Date	KEITH F ROUSE	170559		
		Signature of Attorne LAW OFFICE OF			
		600 South Lake A	venue, Suite 507		
		Pasadena, CA 91		•	
		(626) 449-4211 F rouselaw@hotma		,	
		Name of law firm	- 2		

Fill in this information to identify your case:					
Debtor 1	Edward Uy Hidalgo				
Debtor 2 (Spouse, if filing)	Trixie Quijada				
United States Bankruptcy Court for the: Central District of California					
Case number					

Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:					
1. Disposable income is not determined u11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 15,861.78 6,883.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1 Trixie Quijada Debtor 2 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6.883.00 15.861.78 + \$ 22,744.78 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 22,744.78 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 22,744.78 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 22.744.78 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 272,937.36 15b. The result is your current monthly income for the year for this part of the form.

Edward Uy Hidalgo

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Debt Debt			rd Uy Hidaigo Quijada		Case number (if known)		
16	. Cal	culate th	ne median family income that applies to yo	ou. Follow these ste	ps:		
	16a	. Fill in th	ne state in which you live.	CA			
	16h	. Eill in th	ne number of people in your household.	3			
			ne median family income for your state and s			Φ.	77,412.00
	100	To find	a list of applicable median income amounts, tions for this form. This list may also be available.	go online using the		\$	11,412.00
17	. Hov		lines compare?				
	17a	. 🗆	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No				
	17b	. ■	Line 15b is more than line 16c. On the top of $1325(b)(3)$. Go to Part 3 and fill out Calculyour current monthly income from line 14 above.	lation of Your Disp			
Par	t 3:	Calcu	ulate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)			
18.	Cop	oy your t	total average monthly income from line 11			. \$	22,744.78
19.	con	tend that	marital adjustment if it applies. If you are it calculating the commitment period under 11 some, copy the amount from line 13.				
			narital adjustment does not apply, fill in 0 on I	ine 19a.		-\$	0.00
	19b	. Subtra	ct line 19a from line 18.			\$	22,744.78
20.	Cal	culate ye	our current monthly income for the year.	Follow these steps:			00 744 70
	20a	. Copy lii	ne 19b			\$	22,744.78
		Multiply	by 12 (the number of months in a year).			<u> </u>	12
	20b	. The res	sult is your current monthly income for the ye	ar for this part of the	e form	\$	272,937.36
	20c	. Copy th	ne median family income for your state and s	ize of household fro	m line 16c	\$	77,412.00
	21.	How de	o the lines compare?				
			ne 20b is less than line 20c. Unless otherwis eriod is 3 years. Go to Part 4.	e ordered by the co	urt, on the top of page 1 of this form, ch	neck box 3, Ti	he commitment
			ne 20b is more than or equal to line 20c. Unloamitment period is 5 years. Go to Part 4.	ess otherwise order	ed by the court, on the top of page 1 of	this form, che	eck box 4, The
Par	t 4:	Sign	Below				
	Ву	signing h	ere, under penalty of perjury I declare that the	e information on this	s statement and in any attachments is	true and corre	ect.
)	(/s	/ Edwar	d Uy Hidalgo	х	/s/ Trixie Quijada		
	E	dward l	Jy Hidalgo		Trixie Quijada		
		•	of Debtor 1 ember 13, 2017		Signature of Debtor 2 Date November 13, 2017		
	_ ~		DD / YYYY		MM / DD / YYYY		
	If yo	ou check	ed 17a, do NOT fill out or file Form 122C-2.				
	If yo	ou check	ed 17b, fill out Form 122C-2 and file it with th	is form. On line 39	of that form, copy your current monthly	income from	line 14 above.

Edward Uy Hidalgo

Fill in this info	ormation to identify your case:				
Debtor 1	Edward Uy Hidalgo				
Debtor 2 (Spouse, if filin	Trixie Quijada				
United States Bankruptcy Court for the: Central District of California					
Case number(if known)					

☐ Check if this is an amended filing

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.378.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Edward Uy Hidalgo Debtor 1 Trixie Quijada Case number (if known) Debtor 2 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 3 7c. Subtotal. Multiply line 7a by line 7b. 147.00 Copy here=> \$ 147.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> \$ 147.00 7g. **Total.** Add line 7c and line 7f 147.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 557.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,513.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **HSBC Bank, USA / Wells Fargo Bank** 9,123.80 Сору Repeat this amount 9.123.80 9,123.80 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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Trixie Quijada Debtor 2 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 600.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 2010 Mercedes GL 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 here => line 33b Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a, if this number is less than \$0, enter \$0, expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for Name of each creditor for Vehicle 2 Average monthly payment -NONE-Сору Repeat this here amount on line Total average monthly payment 0.00 0.00 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 189.00 not claim more than the IRS Local Standard for Public Transportation.

Edward Uy Hidalgo

Debtor 1

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Debtor 1 Debtor 2 Edward Uy Hidalgo
Trixie Quijada Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS categorie		ve, you are allowed your monthly expense	s for	
16.	Taxes: The total monthly a self-employment taxes, so your pay for these taxes. Hand subtract that number f Do not include real estate,	\$	2,493.74			
17.	Involuntary deductions: contributions, union dues,		ductions that your job	requires, such as retirement		0.00
			•	401(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total filing together, include pay Do not include premiums f of life insurance other than	\$	30.00			
19.	Court-ordered payments administrative agency, suc Do not include payments of	\$	0.00			
20.		thly amount that you pay for				
	as a condition for your j	ob, or				
	for your physically or m	entally challenged depender	nt child if no public ed	ucation is available for similar services.	\$	0.00
21.		nly amount that you pay for our country any elementary or second	·	bysitting, daycare, nursery, and preschool.	\$	900.00
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.					
22	•	ince or health savings accou		•	\$	238.24
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						0.00
	24. Add all of the expenses allowed under the IRS expense allowances.					
24.		allowed under the IRS expe	ense allowances.		\$	6,532.98
	Add all of the expenses a Add lines 6 through 23. litional Expense Deductio	ns These are additional of	deductions allowed b	y the Means Test. ces listed in lines 6-24.	\$	6,532.98
Add	Add lines 6 through 23. litional Expense Deductio Health insurance, disabil	ns These are additional on Note: Do not include a ity insurance, and health s	deductions allowed b any expense allowan savings account exp			6,532.98
Add	Add lines 6 through 23. litional Expense Deductio Health insurance, disabilinsurance, disability insurance	ns These are additional on Note: Do not include a ity insurance, and health s	deductions allowed b any expense allowan savings account exp	ces listed in lines 6-24. enses. The monthly expenses for health		6,532.98
Add	Add lines 6 through 23. litional Expense Deductio Health insurance, disabil insurance, disability insura your dependents.	ns These are additional on Note: Do not include a ity insurance, and health s	deductions allowed by any expense allowand savings account exp ounts that are reason	ces listed in lines 6-24. enses. The monthly expenses for health		6,532.98
Add	Add lines 6 through 23. litional Expense Deductio Health insurance, disabilinsurance, disability insurayour dependents. Health insurance	ns These are additional of Note: Do not include a ity insurance, and health since, and health savings according to the sa	deductions allowed by any expense allowangs account expounts that are reason \$ 0.00	ces listed in lines 6-24. enses. The monthly expenses for health		6,532.98
Add	Add lines 6 through 23. Iitional Expense Deductio Health insurance, disabilinsurance, disability insurayour dependents. Health insurance Disability insurance	ns These are additional of Note: Do not include a ity insurance, and health since, and health savings according to the sa	deductions allowed by any expense allowens savings account expounts that are reason \$ 0.00 \$ 0.00	ces listed in lines 6-24. enses. The monthly expenses for health ably necessary for yourself, your spouse, or		0.00
Add	Add lines 6 through 23. Iitional Expense Deductio Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ns These are additional of Note: Do not include a lity insurance, and health since, and health savings according to total amount?	deductions allowed by any expense allowens savings account expounts that are reason \$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00	ces listed in lines 6-24. enses. The monthly expenses for health ably necessary for yourself, your spouse, or	or	
Add	Add lines 6 through 23. Iitional Expense Deductio Health insurance, disabili insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do	ns These are additional of Note: Do not include a sity insurance, and health since, and health savings according to the s	deductions allowed by any expense allowens savings account expounts that are reason \$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00	ces listed in lines 6-24. enses. The monthly expenses for health ably necessary for yourself, your spouse, or	or	
Add 25.	Add lines 6 through 23. Iitional Expense Deductio Health insurance, disabili insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do yes Continued contributions continue to pay for the rea your household or membe	These are additional of Note: Do not include a sity insurance, and health since, and health savings according total amount? you actually spend? to the care of household conable and necessary care	deductions allowed by any expense allowands avings account expounts that are reason \$ 0.00 \\ \\$ 0.000 \\ \\$ 0.00 \\ \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00 \\ \\$ 0.00	Copy total here=> Copy total monthly expenses that you will derly, chronically ill, or disabled member of r such expenses. These expenses may	or\$	
25. 26.	Add lines 6 through 23. Iitional Expense Deductio Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do yes Continued contributions continue to pay for the rea your household or membe include contributions to an Protection against family	to the care of household conable and necessary care of your immediate family will account of a qualified ABLE of violence. The reasonably response includes a solution of the care of a qualified ABLE of violence. The reasonably response includes a solution of the care of a qualified ABLE of violence.	savings account expounts that are reason \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ por family members. The and support of an element of the program. 26 U.S.C. The ecessary monthly exponence and support of the program. 26 U.S.C. The ecessary monthly exponence and support of the program. 26 U.S.C. The ecessary monthly exponence allowed to pay for program. 26 U.S.C. The ecessary monthly exponence allowed to pay for program. 26 U.S.C. The ecessary monthly exponence allowed to pay for program.	Copy total here=> Copy total monthly expenses that you will derly, chronically ill, or disabled member of r such expenses. These expenses may	or \$	0.00

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Debtor 1 Debtor 2	Edward Uy Hidalgo Trixie Quijada	Case number (if known)					
	Additional home energy costs. Your homeline 8.	e energy costs are included in your insurance and operating	expenses on				
	If you believe that you have home energy or 8, then fill in the excess amount of home en	osts that are more than the home energy costs included in exergy costs	xpenses on lin	е			
	You must give your case trustee documents amount claimed is reasonable and necessa	•					
		ren who are younger than 18. The monthly expenses (not bendent children who are younger than 18 years old to atten					
	You must give your case trustee documents claimed is reasonable and necessary and n						
	* Subject to adjustment on 4/01/19, and eve	ry 3 years after that for cases begun on or after the date of a	adjustment.	\$_	0.00		
	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be most than 5% of the food and clothing allowances in the IRS National Standards.						
	To find a chart showing the maximum additinstructions for this form. This chart may als						
	You must show that the additional amount of	laimed is reasonable and necessary.		\$	0.00		
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the form of cashization. 11 U.S.C. § 548(d)(3) and (4).	sh or financial				
	Do not include any amount more than 15%	of your gross monthly income.		\$_	0.00		
	Add all of the additional expense deduct Add lines 25 through 31.	ions.		\$	0.00		
Ded	uctions for Debt Payment						
	For debts that are secured by an interest i oans, and other secured debt, fill in lines	n property that you own, including home mortgages, ve 33a through 33e.	hicle				
	To calculate the total average monthly paymer creditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each secur akruptcy. Then divide by 60.	red				
	Mortgages on your home			Average monthly payment			
33a.	Copy line 9b here		=>	\$	9,123.80		
	Loans on your first two vehicles						
33b.	•		=>	\$	0.00		
	0 " 10 1			¢			
33c.	Copy line 13e here		=>	Φ	0.00		
33d.	List other secured debts:						
Nam	e of each creditor for other secured debt	inc	es payment lude taxes insurance?				
			No				
	-NONE-		Yes	œ.			
				\$			
			No				
			Yes	\$			
			No				
			Yes +	\$			
33e	Total average monthly payment. Add lines	33a through 33d \$ 9,12	23.80 Copy total here	_	9,123.80		

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Edward Uy Hidalgo Debtor 1 Trixie Quijada Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount 31205 Sutherland Drive Redlands, CA 92373 San Bernardino County Residence: **HSBC Bank, USA / Wells Fargo** 31205 Sutherland Drive 2.803.52 **Bank 168,211.17** \div 60 = \$ Redlands, CA 92373 \$ $\div 60 = $$ \$ $\div 60 = +$ \$ Copy total 2,803.52 2,803.52 Total l \$ here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ■ No. Go to line 36. The second secon ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷60 \$ 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense 11,927.32 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,532.98 expense allowances Copy line 32, All of the additional expense deductions 0.00 Copy line 37, All of the deductions for debt payment 11,927.32 18,460.30 18,460.30 Total deductions..... Copy total here=>

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Edward Uy Hidalgo Debtor 1 Trixie Quijada Debtor 2 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 22,744.78 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here 18.460.30 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense 0.00 0.00 Total \$ here=>\$ Copy 44. **Total adjustments.** Add lines 40 through 43. 18.460.30 18,460.30 here=> -\$ 4,284.48 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ Increase ☐ 122C-1 ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease □ 122C-1 ☐ Increase ☐ Decrease ☐ 122C-2

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Debtor 1 Debtor 2	Edward Uy Hidalgo Trixie Quijada		Case number (if known)
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that the inform		,
X	/s/ Edward Uy Hidalgo Edward Uy Hidalgo Signature of Debtor 1	Х	/s/ Trixie Quijada Trixie Quijada Signature of Debtor 2
Date	November 13, 2017 MM / DD / YYYY	Date	November 13, 2017 MM / DD / YYYY

Case 6:17-bk-19433-MH Doc 1 Filed 11/13/17 Entered 11/13/17 17:27:07 Page 53 of 55 Main Document Attorney or Party Name, Address, Telephone & FAX Nos., FOR COURT USE ONLY State Bar No. & Email Address **KEITH F ROUSE 170559** 600 South Lake Avenue, Suite 507 Pasadena, CA 91106 (626) 449-4211 Fax: (626) 229-9330 California State Bar Number: 170559 rouselaw@hotmail.com Debtor(s) appearing without an attorney Attorney for Debtor **UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA** In re: CASE NO .: **Edward Uy Hidalgo** CHAPTER: 13 Trixie Quijada **VERIFICATION OF MASTER MAILING LIST OF CREDITORS** [LBR 1007-1(a)] Debtor(s). Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 2 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions. Date: November 13, 2017 /s/ Edward Uy Hidalgo Siganture of Debtor 1 Date: November 13, 2017 /s/ Trixie Quijada Signature of Debtor 2 (joint debtor)) (if applicable)

/s/ KEITH F ROUSE

Signature of Attorney for Debtor (if applicable)

Date: November 13, 2017

Edward Uy Hidalgo 31205 Sutherland Drive Redlands, CA 92373

Trixie Quijada 31205 Sutherland Drive Redlands, CA 92373

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First Source Advantage, LLC PO Box 628 Buffalo, NY 14240

HSBC Bank, USA / Wells Fargo Bank Attention: Bankruptcy Department MAC# D3347-014 3476 Stateview Blvd. Fort Mill, SC 29715 Merrick Bank Resurgent Capital Services PO Box 10368 Greenville, SC 29603-0368

North American Company 4350 Westown Parkway Panora, IA 50216

Prudential Financial Stuart Allan & Associates, Inc. 5447 E. 5th Street, Suite 110 Tucson, AZ 85711

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